

**HAWAII STATE ETHICS COMMISSION**

1001 BISHOP STREET, HONOLULU, HAWAII 96813

or P.O. BOX 616, HONOLULU, HAWAII 96809

TEL: (808) 587-0460 FAX: (808) 587-0470

email: ethics@hawaiiethics.orgWeb site: www.hawaii.gov/ethics

THIS SPACE FOR OFFICE USE ONLY

NOTE: This is a public document.

'13 APR -2 AIO :58

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

STATE OF HAWAII
STATE ETHICS COMMISSION

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Sabas	John	R.	(808) 523-0362
MAILING ADDRESS (Street)			FAX (808) 523-0842
ASB Tower, Suite 2200, 1001 Bishop Street			EMAIL jsabas@carlsmith.com
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Carlsmith Ball LLP			(808) 523-2500
MAILING ADDRESS (Street)			FAX (808) 523-0842
ASB Tower, Suite 2200, 1001 Bishop Street			EMAIL
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	

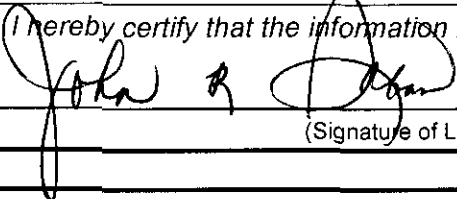
PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Kohler-Leland		(907) 565-5531
MAILING ADDRESS (Street)		FAX (907) 562-4086
12800 Huffman Circle		EMAIL
(City)	(State)	(Zip Code)
Anchorage	AK	99516
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Meera Kohler		(907) 565-5531
MAILING ADDRESS (Street)		FAX (907) 562-4086
12800 Huffman Circle		EMAIL
(City)	(State)	(Zip Code)
Anchorage	AK	99516

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input checked="" type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | _____ |

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



(Signature of Lobbyist)

03/19/2013

(Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
------	--

Meera Kohler

NAME OF ORGANIZATION (if applicable)

Kohler-Leland

TELEPHONE

(907) 565-5531

MAILING ADDRESS (Street)

12800 Huffman Circle

FAX (907) 562-4086

EMAIL

(City)

Anchorage

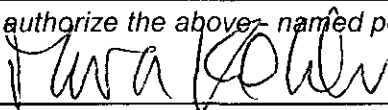
(State)

AK

(Zip Code)

99516

I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.



(Signature of Authorizing Officer or Person Represented)

3/25/2013

(Date)